

# Audits, Inspections and Reports

## III. TRICARE CONTRACTOR MONTHLY WORKLOAD REPORT INSTRUCTIONS

### A. Information Requirement

The contractor shall submit to the Contracting Officers' Representative, TRICARE Management Activity (TMA), separate TRICARE Contractor Monthly Workload Reports, TMA Forms 742 and 743 (Figure 1-3-A-1 and Figure 1-3-A-2), of *network* and *non-network* data for each state in its jurisdiction with summary *network* and *non-network* reports for the contract. The reports will cover the period beginning on the first day of the report month, and ending on the last day of the report month. These summary and state reports are due on the forty-fifth (45th) calendar day following the start date of the contract and then on the fifteenth (15th) calendar day of each month (or the first workday following the *fifteenth* (15th) calendar day if the *fifteenth* (15th) is not a business day) following the report period throughout the duration of the contract. Any adjustments to previously submitted data requires an explanation of the differences, including the cause, either in the "Remarks" section or in a separate report. These reports are not to be telecopied unless specifically requested by the TMA. At the discretion of TMA, or as may be required by law, contractor performance statistics contained in these reports may be released to the public.

### B. Instructions for Preparation

#### 1. Section A: Claims

For purposes of this chapter, a claim is defined as any request for payment for services rendered related to care and treatment of a disease or injury which is received from a claimant by a TMA contractor on any TMA-approved claim form or approved electronic media. Reports of services rendered, which do not result in the submission of claims, as defined above, are not to be included in the reports required by this chapter.

##### a. A.1.a. - Pending End of Prior Month

Enter the number reported in line A.4. on the preceding month's report.

##### b. A.1.a.(1) - Correction to Prior Month's Report

Enter the net number of claims which were actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section requires an explanation in Section C, "Remarks."

##### c. A.1.b. - Adjusted Opening Pending

Enter the result of A.1.a., plus or minus A.1.a.(1).

##### d. A.2. - Receipts

Enter the number of claims accepted in the custody of the contractor. Estimate the number of non-keyed *network* versus *non-network* receipts by applying the percentage of keyed claims received during the reporting period.

**EXAMPLE:**

Total monthly receipts	=	10,000	
Total Keyed Receipts	=	8,000	(5,000 <i>network</i> = 62.5%)
			(3,000 <i>non-network</i> = 37.5%)
Total Non-Keyed Receipts	=	2,000	(2,000 X 62.5% = 1,250 <i>network</i> )
			(2,000 X 37.5% = 750 <i>non-network</i> )
Add estimates for non-keyed receipts to keyed receipts:			
Total Receipts <i>Network</i>	=	5,000 + 1,250	= 6,250
Total Receipts <i>Non-Network</i>	=	3,000 + 750	= 3,750

**e. A.2.a. - Transfers**

Claims received in A.2. above which are forwarded to another TRICARE contractor having jurisdiction of processing.

**f. A.2.b. - Returns**

Enter the number of claims returned to the claimant.

**g. A.2.c. - Net Receipts**

Enter the result of A.2., minus A.2.a. and A.2.b.

**h. A.3. - Processed to Completion**

Enter the total number of claims paid, applied toward the deductible, or denied.

**i. A.4. - Pending End of Month**

Enter the difference between A.1.b. plus A.2.c. minus A.3.

**j. A.5. - Point of Service (POS) - Processed to****Completion**

Enter the total number of the claims paid under POS. The POS numbers shall be included in the total number of claims processed to completion in line A.3.

**2. Section B: Adjustment Claims**

An adjustment is a correction of the payment or the payment record information on a claim previously processed to completion. (Refer to the [OPM Part Two, Chapter 5, Section I.C.](#))

**a. B.1.a. - Pending End of Prior Month**

Enter the number reported in line B.4. of the preceding month's report.

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III.B.2.b.

## b. B.1.a.(1) - Correction to Prior Month's Report

Enter the net number of adjustments to processed claims which were actually overstated or understated in the previous month's report will be entered using a plus (+) or minus (-). Any entry in this section requires a narrative explanation in Section C, "Remarks."

## c. B.1.b. - Adjusted Opening Pending

Enter the results of B.1.a., plus or minus B.1.a.(1).

## d. B.2. - Receipts

Enter the number of adjustment claims identified during the month. (Refer to [OPM Part Two, Chapter 5, Section I.C.](#))

## e. B.3. - Processed to Completion

Enter the number of adjustment claims which were processed to completion.

## f. B.4. - Pending End of Month

Enter the number of adjustment claims identified which have not been processed to completion. Line B.4. is the difference between B.1.b., plus B.2., minus B.3.

## 3. Section C: Remarks

Enter the number of EMC claims included in the receipts reported in A.2.

## 4. Section D: Inquiries

### a. D.1. - Telephone Inquiries Received

Enter the total number of incoming telephone inquiries received in all locations, including the service center. This data must be substantiated by a log or other documentation. Do not include routine operating calls (calls received from individuals or organizational components within the contractor's operations involving the conduct of normal business) or personal calls.

### b. D.2. - Walk-In's

Report total walk-ins in all locations, including the service center(s).

### c. D.3. - Routine Correspondence

Report in this section the data related to all routine correspondence received into custody. Grievances, requests for appeal or responses to *returned* claims should not be reported here. Questions concerning charges allowed should be included as "routine correspondence." Requests for "Reconsiderations" on issues considered not appealable shall be counted as correspondence.

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III.B.4.d.

**d. D.3.a.(1) - Pending End of Prior Month**

reports.  
Enter the number reported in line D.3.d. of the prior month's

**e. D.3.a.(1)(a) - Correction to Prior Month's Report**

Enter the net number of pieces of routine correspondence which were actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section requires a narrative explanation in Section E, "Remarks," below.

**f. D.3.a.(2) - Adjusted Opening Pending**

Enter the result of D.3.a.(1), plus or minus D.3.a.(1)(a).

**g. D.3.b. - Receipts**

Enter the number of pieces of routine correspondence accepted into custody.

**h. D.3.c. - Processed to Completion**

Enter the number of pieces of routine correspondence completed, regardless of the manner in which it was completed; i.e., written, telephone, or other.

**i. D.3.d. - Pending End of Month**

Enter on line D.3.d. the difference between D.3.a.(2), plus D.3.b., minus D.3.c.

**j. D.4. - Priority Correspondence**

Enter appropriate data in this section regarding correspondence received from the Office of the Assistant Secretary of Defense (Health Affairs), TMA, members of Congress, and others designated as priority by the contractor.

**k. D.4.a.(1) - Pending End of Prior Month**

report.  
Enter the number reported in line D.4.d. of the prior month's

**l. D.4.a.(1)(a) - Correction to Prior Monthly Report**

Enter the net number of pieces of priority correspondence which were actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section (plus or minus) requires a narrative explanation in Section E, "Remarks," below.

**m. D.4.a.(2) - Adjusted Opening Pending**

Enter the result of D.4.a.(1), plus or minus D.4.a.(1)(a).

**n. D.4.b. - Receipts**

Enter the number of pieces of priority correspondence accepted into custody.

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III.B.4.o.

**o. D.4.c. - Processed to Completion**

Enter the number of pieces of priority correspondence completed.

**p. D.4.d. - Pending End of Month**

Enter on line D.4.d., the difference between D.4.a.(2), plus D.4.b., minus D.4.c.

**5. Section E: Remarks**

**6. Section F: Expedited Preadmission/Preprocedure Reconsiderations (Expedited Appeal Cases)**

Report in this section the data related to all expedited appeal cases received into custody. The contractor shall count as a receipt any case received in which the appealing party is raising objection to the contractor's preadmission/preauthorization medical necessity determination. Correspondence concerning non-appealable issues (See [OPM Part Three, Chapter 7, Section II.C.2.](#)) is to be reported in Section D, "Inquiries." Correspondence qualifying as a grievance is to be reported in Section [I](#), "Grievances."

**a. F.1.a. - Pending End of Prior Month**

Enter in the "Total" column the number reported in line F.4. of the preceding month's report.

**b. F.1.a.(1) - Correction to Prior Month's Report**

Enter in the "Total" column the net number of expedited appeal cases actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section will require a narrative explanation in Section E, "Remarks," above.

**c. F.1.b. - Adjusted Opening Pending**

Enter in the "Total" column the result of F.1.a., plus or minus F.1.a.(1).

**d. F.2. - Receipts**

Enter in the "Total" column the number of expedited appeal cases accepted in the custody of the contractor.

**e. F.3.a. - Initial Decision Upheld**

Enter the number of expedited appeal cases receiving final replies when the contractor affirmed the initial decision as being correct in its entirety.

**f. F.3.b. - Initial Decision Partially Upheld**

Enter the number of expedited appeal cases receiving final replies when the contractor affirmed only a portion of the initial decision as being correct.

**g. F.3.c. - Initial Decision Reversed**

Enter the number of expedited appeal cases receiving final replies when the contractor reversed the initial decision in its entirety.

**h. F.3.d. - Total Processed to Completion**

Enter the sum of F.3.a., plus F.3.b., plus F.3.c.

**i. F.4. - Pending End of Month**

Enter the sum of F.1.b., plus F.2., minus F.3.d.

## 7. Section G: Nonexpedited *Medical Necessity* Reconsiderations

Report in this section the data related to all nonexpedited *medical necessity* appeal cases received into custody. The contractor shall count as a receipt any case received in which the appealing party is raising objection to the contractor's determination of coverage. Correspondence concerning nonappealable issues (See [OPM Part Three, Chapter 7, Section II.C.2.](#)) is to be reported in Section D, "Inquiries." Correspondence qualifying as a grievance is to be reported in Section I, "Grievances."

**a. G.1.a. - Pending End of Prior Month**

Enter in the "Total" column the number reported in line G.4. of the preceding month's report.

**b. G.1.a.(1) - Correction to Prior Month's Report**

Enter in the "Total" column the net number of nonexpedited *medical necessity* appeal cases actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section will require a narrative explanation in Section E, "Remarks," above.

**c. G.1.b. - Adjusted Opening Pending**

Enter in the "Total" column the result of G.1.a., plus or minus G.1.a.(1).

**d. G.2. - Receipts**

Enter in the "Total" column the number of nonexpedited *medical necessity* appeal cases accepted in the custody of the contractor.

**e. G.3.a. - Initial Decision Upheld**

Enter the number of nonexpedited *medical necessity* appeal cases receiving final replies when the contractor affirmed the initial decision as being correct in its entirety.

**f. G.3.b. - Initial Decision Partially Upheld**

Enter the number of nonexpedited *medical necessity* appeal cases receiving final replies when the contractor affirmed only a portion of the initial decision as being correct.

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III.B.7.g.

## g. **G.3.c. - Initial Decision Reversed**

Enter the number of nonexpedited *medical necessity* appeal cases receiving final replies when the contractor reversed the initial decision in its entirety.

## h. **G.3.d. - Total Processed to Completion**

Enter the sum of G.3.a., plus G.3.b., plus G.3.c.

## i. **G.4. - Pending End of Month**

Enter the sum of G.1.b., plus G.2., minus G.3.d.

## 8. **Section H: Nonexpedited Factual Determinations**

Report in this section the data related to all non-expedited factual determination appeal cases received into custody. The contractor shall count as a receipt any case received in which the appealing party is raising objection to the contractor's determination of coverage. Correspondence concerning nonappealable issues (See OPM Part Three, Chapter 7, Section II.C.2.) is to be reported in Section D, "Inquiries." Correspondence qualifying as a grievance is to be reported in Section I, "Grievances."

### a. **H.1.a. - Pending End of Prior Month**

Enter in the "Total" column the number reported in line G.4. of the preceding month's report.

### b. **H.1.a.(1) - Correction to Prior Month's Report**

Enter in the "Total" column the net number of nonexpedited factual determination appeal cases actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section will require a narrative explanation in Section E, "Remarks" above.

### c. **H.1.b. - Adjustment Opening Pending**

Enter in the "Total" column the result of H.1.a., plus or minus H.1.a.(1).

### d. **H.2. - Receipts**

Enter in the "Total" column the number of nonexpedited factual determination appeal cases accepted in the custody of the contractor.

### e. **H.3.a. - Initial Decision Upheld**

Enter the number of nonexpedited factual determination appeal cases receiving final replies when the contractor affirmed the initial decision as being correct in its entirety.

### f. **H.3.b. - Initial Decision Partially Upheld**

Enter the number of nonexpedited factual determination appeal cases receiving final replies when the contractor affirmed only a portion of the initial decision as being correct.

g. **H.3.c. - Initial Decision Reversed**

Enter the number of nonexpedited factual determination appeal cases receiving final replies when the contractor reversed the initial decision in its entirety.

h. **H.3.d. - Total Processed to Completion**

Enter the sum of H.3.a., plus H.3.b., plus H.3.c.

i. **H.4. - Pending End of Month**

Enter the sum of H.1.b., plus G.2., minus G.3.d.

**9. Section I: Grievances (TMA Form 742 only)**

In this section report the data related to all grievances received into custody.

a. **I.1.a. - Pending End of Prior Month**

Enter in the "Total" column the number reported in I.4. of the preceding month's report.

b. **I.1.a.(1) - Correction to Prior Month's Report**

Enter in the "Total" column the net number of grievances actually overstated or understated in the previous month's report using a plus (+) or minus (-). Any entry in this section will require a narrative explanation in Section E, "Remarks," above.

c. **I.1.b. - Adjusted Opening Pending**

Enter in the "Total" column the result of I.1.a., plus or minus I.1.a.(1).

d. **I.2. - Receipts**

Enter in the "Total" column the number of grievances accepted in the custody of the contractor. The contractor should count as a receipt any case received which meets the definition of a grievance.

e. **I.3. - Total Processed to Completion**

Enter the number of grievances completed.

f. **I.4. - Pending End of Month**

Enter the sum of I.1.b., plus I.2., minus I.3.